Docket Number (Optional)

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid QMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

(Fees pursuant to	MFCP.88143					
Application Number 09/982,337			Filed 10/18/2001			
For Method For Graphical Representation of a Content Collection						
Art Unit 2173			Examiner I	Dennis G.	Bonshock	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
_		<u>Fee</u>	Small Entit	y Fee	*	
One mo	onth (37 CFR 1.17(a)(1))	\$120	\$60	\$		
X Two mo	onths (37 CFR 1.17(a)(2))	\$450	\$225	\$	450	
Three n	nonths (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four mo	onths (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five mo	onths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
Applicant claims small entity status. See 37 CFR 1.27.						
A check in the amount of the fee is enclosed.						
X Payment by credit card. Form RTQ 2008 is attached.						
The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19–2112 . I have enclosed a duplicate copy of this sheet.						
WARNING: Information on this form may become public. Credit card information should not be included on this form.						
Provide credit card information and authorization on PTO-2038.						
I am the a	applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
x attorney or agent of record. Registration Number <u>54851</u>						
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34						
/MONPLAISIR HAMILTON/			06	/18/2007		
Signature .			Date			
MONPLAISIR HAMILTON			202-783-8400			
Typed or printed name Telephone Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
his collection of information is required by 37 CFR 1.136(p). The information is required to obtain or retain a benefit by the public which is to fits (and by the ISPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to omplete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any						

comments on the amount of time you require to complete his form and/or suggestions for reducing his burden, should be sent to the Chief Information Offin U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.